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SERIAL NUMBER 10/620,028	FILING OR 371(c) DATE 07/14/2003 RULE	CLASS 482	GROUP ART UNIT 3764	ATTORNEY DOCKET NO. TIAHRT-01
APPLICANTS Leif Tiahrt, Santa Barbara, CA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 10/09/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 2
ADDRESS LEIF K. TIAHRT 1417 MOUNTAIN AVE. SANTA BARBARA, CA93101-4723				
TITLE OSCILLATORY RESISTANCE EXERCISE DEVICE AND METHOD				
FILING FEE RECEIVED 775	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	